pplication or Do	cket Nı	ımber
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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			28					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			28 min	8 minus 20= '		• 8		X\$ 9=	12	OR	X\$18=	
IND	EPENDENT CL	6 min	us 3 =	* 3			X40=	120	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	122	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	Į	TOTAL	547	OR	TOTAL	
Claims as amended - Part II							·		4	OTHER		
_		(Column 1)		(Colui		(Column 3)	51 6	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDIN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM			+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
			ADDIT. FEE		2	ADDIT. FEET						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL AINA	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA					CLAIN			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		_										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
S	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										}	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												